







PATHWAYS TO BECOMING AN ADDICTION AND RECOVERY TREATMENT SERVICES (ARTS) MEDICAID PROVIDER

October 2018



Importance for Preliminary Work

- Executive and Legislative branches fully support the Medicaid substance use disorder system transformation to address the opioid crisis
- DMAS has transitioned services to evidence based practices models
- American Society of Addiction Medicine (ASAM) is nationally recognized evidenced based practice





Preliminary work:

- Review the ARTS webpage for information on the substance use disorder services transformation: http://www.dmas.virginia.gov/#/arts
- Make sure you have or pursue the correct state license, whether through Virginia Department of Behavioral Health and Developmental Services (DBHDS) and the Department of Health Professions (DHP)
 - The correct licenses are required as part of the credentialing and contracting process with the Medicaid health plans and Magellan.
- Credentialing and contracting requirements are also based on the type of service (ASAM Level of Care) you intend to provide in the new ARTS system.





Preliminary work:

- 4. Buy/Acquire and review the ASAM Criteria: http://www.asam.org/quality-practice/guidelines-and-consensus-documents/the-asam-criteria/text
- If needed, attend ASAM Trainings and VDH/DMAS Addiction Disease Management Trainings
- 6. Based on the ASAM Criteria evidence based quality standards, determine what substance use disorder related service (or ASAM Level of Care) you provide or want to provide for Medicaid reimbursement.





Preliminary work:

- 7. Determine whether you are already credentialed and contracted with the Medicaid health plans and Magellan.
- 8. Determine which Medicaid health plans you need to be credentialed and contract with:

 http://www.virginiamanagedcare.com/choose/compare-plans
- 9. All providers should be credentialed and contract with Magellan for ARTS coverage for fee-forservice members.





ASAM Level 4

Medically Managed Intensive Inpatient

- Submit documentation to Magellan and each of the Medicaid health plans to start the credentialing and contracting process if not already in-network.
- Magellan and the Medicaid health plans will request any additional documents required for credentialing and contracting.





Residential Treatment Services (RTS)

- Obtain or amend DBHDS license if needed.
- Add DBHDS Medical Detox license for all ASAM Level 3.7.
- Add DBHDS Medical Detox license for ASAM Levels 3.5 and 3.3 only if providing withdrawal management.
- Submit DBHDS Service Modification to add Substance Abuse (SA) services to license if not currently licensed as SA provider.





- Providers to also submit completed ARTS Attestation Form for ASAM Levels 2.1 to 3.7, ARTS Organizational Staff Roster and a copy of the appropriate DBHDS license(s) to Magellan and each of the Medicaid health plans to start the credentialing and contracting process.
- Magellan and the Medicaid health plans will request any additional documents required for credentialing and contracting.





Residential Treatment Services (RTS) continued

- Complete the ARTS Attestation Form for ASAM Levels 2.1 to 3.7, ARTS Organizational Staff Roster and submit these documents along with a copy of the appropriate DBHDS license(s) to the MCOs.
- For providers needing ASAM certification for ASAM level of care submit a request along with attestation to:
 - Email: <u>SUD@dmas.virginia.gov</u>
 - Mail signed copy:

DMAS / Addiction and Recovery Treatment Services

Attention: Ke'Shawn Harper

600 East Broad Street, Suite 1300

Richmond, Virginia 23219





- DMAS will submit documentation to the DMAS
 Contractor who is performing reviews and site visits
 to determine if RTS providers meet the attested
 ASAM Levels of Care.
- DMAS Contractor will contact the RTS provider within two weeks of receipt to schedule a site visit and review based on ASAM Criteria and information submitted to DMAS.
- DMAS Contractor will provide a Site Visit Report with outcome of their ASAM Level of Care Assessment to the RTS provider after site visit.





- RTS provider will submit the Site Visit Report verifying that they meet ASAM requirements for the Residential Level of Care to Magellan and each of the Medicaid health plans as part of the credentialing and contracting process
- DMAS received approval of the Demonstration Waiver from CMS which allows Medicaid reimbursement for facilities with greater than 16 beds. Providers expanding bed capacity will need to update their DBHDS licenses once staff requirements are met.





- If RTS provider does not meet ASAM criteria for a specific Residential Level, they will have 60 days to submit updated information to the Contractor demonstrating that they meet this level of care.
- The Contractor will reevaluate the RTS provider based on this updated information and determine if they meet ASAM criteria for the specific level within 60 days.





ASAM Levels 2.5 and 2.1

Partial Hospitalization and Intensive Outpatient

- Obtain or amend DBHDS license if needed.
- Add DBHDS Outpatient Managed Withdrawal Service License only if performing outpatient withdrawal management
- Complete ARTS Attestation Form for ASAM Level 2.1 to 3.7 and ARTS Organizational Staff Roster and submit along with a copy of the appropriate DBHDS license(s) to Magellan and each of the Medicaid health plans to start the credentialing and contracting process if not already in-network.





ASAM Level 1.0 and 0.5

Outpatient and SBIRT

- Must be licensed or credentialed by the Department of Health Professions.
- Contact Magellan and each of the Medicaid health plans to start the credentialing and contracting process if not already in-network.
- Magellan and the Medicaid health plans will request any additional documents required for credentialing and contracting.





Opioid Treatment Programs (OTP)

- Must be licensed by DBHDS as OTP
- Complete ARTS OTP Attestation Form and ARTS
 Organizational Staff Roster and submit Magellan and the
 Medicaid health plans to start the credentialing and
 contracting process if not already in-network.
- Magellan and the Medicaid health plans will request any additional documents required for credentialing and contracting.
- Opioid Treatment Programs that dispense buprenorphine products will not need to be credentialed as an OBOT to receive the benefits of the OBOT model:
 - Benefits: no service authorization, OBOT payment model and new payment for substance use care coordination in OBOT setting.





Preferred-Office Based Opioid Treatment (OBOT)

- Licensed physician must have completed the 8 hour training course approved by SAMHSA and obtained a waiver to prescribe buprenorphine for opioid use disorder from the Drug Enforcement Administration (DEA).
- Licensed Nurse Practitioner or Physician's Assistant must have completed the 24 hours of training required by the SAMHSA and obtained a waiver to prescribe buprenorphine for opioid use disorder from the DEA.
 - The Physician Assistant must be supervised by a buprenorphine-waivered physician.





Preferred Office Based Opioid Treatment (OBOT) cont.

 Licensed behavioral health provider (licensed psychiatrist, licensed clinical psychologist, licensed clinical social worker, licensed professional counselor, licensed psychiatric clinical nurse specialist, licensed psychiatric nurse practitioner, licensed marriage and family therapist, licensed substance abuse treatment practitioner, or Certified Substance Abuse Counselor under supervision of a licensed provider) must be colocated at the same practice site and provide counseling during clinic sessions when the buprenorphine-waivered practitioner is prescribing buprenorphine or naltrexone to patients with opioid use disorder.





Preferred Office Based Opioid Treatment (OBOT) cont.

Community Service Boards and Federally-Qualified Health Centers are not required to have the licensed behavioral health provider co-located at the same practice site and providing counseling during clinic sessions when the buprenorphine-waivered practitioner is prescribing buprenorphine or naltrexone to patients with opioid use disorder.





Preferred Office Based Opioid Treatment (OBOT) cont.

- The licensed behavioral health provider must be employed by the same organization and providing counseling to patients prescribed buprenorphine or naltrexone.
- They must engage in interdisciplinary care planning with the buprenorphine-waivered practitioner including working together to develop and monitor individualized and personalized treatment plans that are focused on the best outcomes for the patient.





Preferred Office Based Opioid Treatment (OBOT) cont.

- Complete ARTS Preferred-OBOT Attestation Form, ARTS Credentialing Checklist and ARTS
 Organizational Staff Roster and submit Magellan and the Medicaid health plans to start the credentialing and contracting process if not already in-network.
- Magellan and the Medicaid health plans will request any additional documents required for credentialing and contracting.





Preferred-OBOT Credentialing Process

Register Prescribers for the virtual "live" course that covers mediations and treatments for Opioid Use Disorder and obtain training needed to obtain the waiver to prescribe buprenorphine

http://www.dmas.virginia.gov/#/artstraining



Verify that your team of a buprenorphine-waivered practitioner and behavioral health professional meets the requirements of the ARTS Preferred-OBOT Credentialing Checklist



Providers will need to be recognized by DMAS and credentialed with Magellan and the health plans as an Preferred OBOT to bill for the higher reimbursement for opioid counseling and new payment for substance use care coordination.



CSBs who are not licensed as OTP may be recognized as Preferred OBOT as long as all Preferred OBOT provider requirements are met.



Preferred OBOT Attestation and Application Packet are posted on the DMAS ARTS web page.





Peer Support Services

The Peer Recovery Specialist (PRS) must:

- Be employed by or have a contractual relationship with a provider enrolled/credentialed with Medicaid or its contractor
- Have the qualifications, education, and experience established by the Department of Behavioral Health and Developmental Services (DBHDS);
- Have received certification in good standing by a certifying body recognized by DBHDS; and
- Be professionally qualified to provide collaborative services to assist individuals in achieving sustained recovery from the effects of mental illness, addiction, or both,
- Have supervision provided by qualified supervisor





Peer Support Services

FORMS NEEDED

- Mental Health and ARTS Peer Recovery Services Attestation Checklist
- Mental Health and ARTS Peer Recovery Services Organizational Staff Roster
- Health Plan and Magellan of Virginia Peer Support Services Contact Information

http://www.dmas.virginia.gov/#/artscredentialing





Peer Support Services

Submit the following to the MCOs and Magellan of Virginia:

- Mental Health and ARTS Peer Recovery Services Attestation Checklist
- Mental Health and ARTS Peer Recovery Services Staff Roster
- Copy of the Certifications for Peer Recovery Specialist
- Copy of Direct Supervisor's Certification of the DBHDS Supervisory Training (as applicable)





Magellan of Virginia Provider Network Relations Contact Information

Magellan

- Brian Segall, Sr. Manager, Network Development
- Phone: 1-800-424-4518
- Email: VAM4Provider@MagellanHealth.com





Medallion 4.0 Managed Care Plans and Magellan of Virginia Provider Network Relations Contact Information

Aetna Better Health of Virginia

- Phone: 1-855-652-8249
- <u>Aetnabetterhealth-VAProviderRelations@aetna.com</u>

Anthem HealthKeepers Plus

- John Bachand
- Email: <u>John.Bachand@anthem.com</u>
- Phone: 804-354-4063

Optima Family Care

- Contracting: 877-865-9075 x 4 or
 - OptimaContract@sentara.com
- Credentialing: 877-865-9075 x 3,3 or
 - BHCredentialing@Sentara.com
- Visit www.optimahealth.com/providers and the Join Our Network option for more details.



Medallion 4.0 Managed Care Plans Provider Network Relations Contact Information

United Healthcare

- Email : VACCCBH@optum.com
- Web: <u>www.providerexpress.com</u> and then select: Quick Links >> Join Our Network

Virginia Premier

- Network Development
- Email: <u>vphpnetdev@virginiapremier.com</u>
- Provider Call Center 877-719-7538
- Visit www.vapremier.com and select "Join our Network" under the Provider tab, complete the recruitment request form and forward to the contracting team.





CCC Plus Managed Care Plans Provider Network Relations Contact Information

Aetna Better Health of Virginia

- Email: <u>Aetnabetterhealth-</u>
 <u>VAProviderRelations@aetna.com</u>
- Phone: 855-652-8249

Anthem HealthKeepers Plus

- John Bachand
- Email: <u>John.Bachand@anthem.com</u>
- Phone: 804-354-4063





CCC Plus Managed Care Plans Provider Network Relations Contact Information

Magellan Complete Care of Virginia

- Brian Segall, Sr. Manager, Network Development
- Phone: 1-800-424-4518
- Email: VAM4Provider@MagellanHealth.com

Optima Health Community Care

- Contracting: 877-865-9075 x 4 or
- OptimaContract@sentara.com
- Credentialing: 877-865-9075 x 3,3 or
- BHCredentialing@Sentara.com
- Visit www.optimahealth.com/providers and the Join Our Network option for more details





CCC Plus Managed Care Plans Provider Network Relations Contact Information

United Healthcare

- Email: VACCCBH@optum.com
- Web: www.providerexpress.com and then select: Quick Links >> Join Our Network

Virginia Premier Health Plan

- Network Development
- Email: <u>vphpnetdev@virginiapremier.com</u>
- Provider Call Center 877-719-7538
- Visit www.vapremier.com and select "Join our Network" under the Provider tab, complete the recruitment request form and forward to the contracting team





Additional Documentation to Submit to Magellan and the Medicaid Health Plans

- Recent State Site Survey
- Certificate of Insurance (Malpractice and General Liability)
- Current Business License
- State License(s) (DBHDS) and Federal DEA License
- Copy of W-9
- Full Disclosure of Ownership Form (CMS 1513)
- CLIA certification for laboratories





ASAM LOC Placement	ASAM Level of WM	VDH/DBHDS License
4 Medically Managed Intensive Inpatient	4-WM Medically Managed Intensive Inpatient Withdrawal Management	Acute Care General Hospital (12VAC5-410)
3.7 Medically Monitored Intensive Inpatient Services (Adult) Medically Monitored High-Intensity Inpatient Services (Adolescent)	3.7-WM Medically Monitored Inpatient Withdrawal Management	 Inpatient Psychiatric Unit Acute Freestanding Psychiatric Hospital Substance Abuse (SA) Residential Treatment Service (RTS) for Adults/Children Residential Crisis Stabilization Unit Medical Detox License required for all
3.5 Clinically Managed High-Intensity Residential Services (Adults) / Medium Intensity (Adolescent) 3.3 Clinically Managed Population-Specific High-Intensity Residential Services (Adults)	3.2-WM Clinically Managed Residential Withdrawal Management	 Inpatient Psychiatric Unit (3.5))/Required for cooccurring enhanced programs SA RTS for Adults (3.3 or 3.5) and Children (3.5) SA and MH RTS for Adults and Children (3.3 or 3.5)/Required for co-occurring enhanced programs Supervised RTS for Adults (3.3) Medical Detox License required for 3.2 WM
3.1 Clinically Managed Low-Intensity Residential Services	n/a	 MH & SA Group Home Service for Adults and Children (Required for co-occurring enhanced programs) Subsidized Living Services for Adults
2.5 Partial Hospitalization Services 2.1 Intensive Outpatient Services	2-WM Ambulatory Withdrawal Management w/ Extended On-site Monitoring	 SA or SA/Mental Health Partial Hospitalization (2.5) SA Intensive Outpatient for Adults, Children and Adolescents (2.1) Outpatient Managed Withdrawal Service Licensed required for 2WM

ASAM Level of Care	License	Credentialing and Contracting Process
2.5 Partial Hospitalization Services 2.1 Intensive Outpatient Services	 SA or SA/Mental Health Partial Hospitalization (2.5) SA Intensive Outpatient for Adults, Children and Adolescents (2.1) Outpatient Managed Withdrawal Service License required for 2WM 	 Obtain DBHDS license or addendum to current licenses. Add DBHDS Outpatient Managed Withdrawal Service License if doing outpatient withdrawal management Complete ARTS Attestation Form for 2.1 to 4.0 and ARTS Organizational Staff Roster and submit along with copy of the appropriate DBHDS license(s) to Magellan and each of the Medicaid health plans to start the credentialing and contracting process if not already in-network. Magellan and the Medicaid health plans will request any additional documents required for credentialing and contracting.
1 Outpatient Services	All Licensed or Credentialed	 Contact Magellan and each of the Medicaid health plans to start the credentialing and contracting process if not already in-network.
o.5 Early Intervention	Providers with Department of Health Professions	2. Magellan and the Medicaid health plans will request any additional documents required for credentialing and contracting
Opioid Treatment Program (OTP)	Opioid Treatment Program licensed by DBHDS	 Complete ARTS OTP Attestation Form and ARTS Organizational Staff Roster and submit along with copy of the appropriate DBHDS license(s) to Magellan and each of the Medicaid health plans to start the credentialing and contracting process if not already in-network. Magellan and the Medicaid health plans will request any additional documents required for credentialing and contracting.
Office Based Opioid	 Approved by DMAS as OBOT Provider 	 Complete and submit the ARTS OBOT Provider Attestation and Application and the DMAS Requirements for OBOT Providers Checklist to DMAS to be reviewed at Fax: 804-452-5450. Contact Magellan and the Medicaid health plans to start the credentialing process and submit any additional required

credentialing process and submit any additional required

Medicaid health plans.

OBOT providers.

credentialing and/or contracting documents to Magellan and the

3. DMAS will notify Magellan and the Medicaid health plans of approved

Practitioners licensed by DHP

Treatment (OBOT)









QUESTIONS? SUD@DMAS.VIRGINIA.GOV

